I.D.	s	__	__	__	__
		_____	_____	_____	_____
		___	___	___	___
		_____	_____	_____	_____
		___	___	___	___
		_____	_____	_____	_____
		___	___	___	___

SUBMITTAL DEADLINES		FOR OFFICE USE ONLY
CURRENT REPORTING TYPE: ☐ QUARTER ☐ FINAL TODAY'S DATE _____/_____/_____		
REPORTING PERIOD	DUE DATE	
☐ August 16th-November 15th	December 15th	
☐ November 16th-February 15th	March 15th June 15th	
☐ February 16th-May 15th	September 15th	
☐ May 16th-August 15th		

Wastewater/Drinking Water Plants

WASTE WATER TREATMENT PLANTS

According to **327 IAC 3-2-1**, a valid construction permit issued by the IDEM Facility Construction Section is required to construct, install, or modify any water pollution treatment/control facility or sanitary sewer. This requirement applies to the construction or alteration of sewage treatment plants at rest areas and subdistrict/unit sites, sewer line extensions that do not meet the criteria of **327 IAC 3-2-4**, discharges of new pollutants that are not considered common "domestic" wastes, and additions of oil-water separators or pump stations to new or existing lines. A completed *Application for Water Pollution Control Facility Construction Permit* {attached} must be submitted to IDEM a minimum of sixty (60) days before the proposed starting date for construction. The application materials must include the following:

1. one set of construction plans and specifications capable of being microfilmed;

2. plans and specifications for wastewater treatment/ control facilities must be certified and sealed by a registered professional engineer, but plans and specifications for sanitary sewer connections may be certified by a registered land surveyor;

3. for projects other than sanitary sewer projects, an appropriate project design summary must be submitted which contains the following information:

(A) a description of the present facility, if any;

(B) receiving stream or wastewater treatment plant;

(C) design data (i.e. design flows, design waste concentrations, anticipated effluent characteristics, unit operations, etc.); and

(D) effluent limitation capability of proposed facility.

4. for sanitary sewer projects, a design summary must be submitted which contains the following information:

(A) design flow data including the number of units to be served, and the design average and peak flow;

(B) length, diameter, type, and construction material of sewer;

(C) type of sewer jointing;

(D) location of connection of proposed sewer to existing municipal collection system;

(E) lift station design data; and

(F) who shall be providing inspection during construction, wastewater treatment and maintenance during operation.

5. for sanitary sewer projects, a letter from the town, city , or sanitary district which has jurisdiction over the sewer project must be submitted. The letter must certify that the proposed project is not expected to cause overloading/bypassing in the collection system under dry weather conditions, and that the treatment plant is capable of adequately treating the flow and achieving applicable NPDES permit effluent limitations; and

6. applications proposing the installation of grinder pump(s) shall also submit evidence of responsibility for ongoing maintenance.

Exclusions

A construction permit is **not** required for the following types of work:

1. a storm sewer that transports only surface runoff;
2. sewer connections for single family dwellings or residences;
3. sewer connections for multi-unit residences, or commercial, manufacturing or industrial buildings, provided that all of the following criteria are met:
    - (A) the length of the sanitary sewer is less than three hundred(300) feet;
    - (B) the sewer is serving a population equivalent of less than twenty five (25);
    - (C) the wastewater flow served by the sewer is less than two thousand five hundred (2,500) gallons per day; and
    - (D) no toxic or other pollutants are present in the wastewater that are incapable of being treated to an acceptable level.
4. all approved and/or properly operating septic tank-absorption field systems with less than four thousand gallons(4,000) of liquid capacity and a properly sized absorption field;
5. all commercial on-site wastewater disposal facilities subject to 410 IAC 6-10;
6. any animal confinement operation; and
7. replacement of equipment of similar design and capacity, which will not adversely effect the wastewater treatment plant operation, its hydraulic design or effluent quality, or the collection system design, operation, or capacity.

All storm water connections must be disconnected from piping before connecting to a sanitary sewer system. Utilize the attached application for the construction of wastewater treatment plants and for changes in the treatment processes in existing plants.

CONSTRUCTION APPLICATION

You can help speed up the process of permit approval by including mailing labels with your application. Having these labels with your application is helpful to you as well as our office. When these labels are included, the amount of time that our office expend towards getting your permit issued becomes less, which enables us to get your permit issued at a faster rate. These mailing labels should have the names and addresses of the affected parties along with our mailing code which is 65-42FC.

For example 65-42FC
JOHN DEERE
111 CIRCLE DR.
YOUR CITY, IN. 44444

To complete your construction application, you must submit all the necessary items. If your application materials are incomplete, you will be sent a deficiency notice, your application will be retained for 60 days, and if the information is not received in that time period your materials will be denied due to incompleteness. Please complete the following steps:

- Compete all the information on the waste water design summary and certify it with a professional engineer's stamp. The general information, Part I, and design data, Part II, should be completely filled out and also other areas that pertain.
- Submit NPDES limits verification for projects that increase the capacity at the wastewater treatment facility. (This information can be obtained from the NPDES permitting section at 317/232-8694.)
- Enclose the proper processing fee. (See attached for schedule).
- Sign and date the application form and fill it out completely. Municipal, Regional Sewer District and Conservancy District projects must be signed by a city, town official or a board representative. Others, such as private waste water treatment plant projects can be signed by the owner or a representative.
- Submit one set of compete plans. Every page must be stamped and signed by a professional engineer.
- List all affected parties. This list should include adjacent property owners, their names and mailing addresses.

Please send construction applications to:

Facility Construction Section
Indiana Department of Environmental Management
100 North Senate Avenue
P.O. Box 6015
Indianapolis, Indiana 46206-6015

Attention: Robin Feller

327 IAC 3.5.5 WASTEWATER CONSTRUCTION PERMIT FEES

A. The following governmental entities shall remit with each application a fee of fifty dollars ($50)* but shall be excluded from payment of fee as described in part B.

1. County, Municipality or Township which is defined as a unit under IC 36-1-2-23 [ ]
2. A Nonprofit Organization [ ]
3. A Conservancy District [ ]
4. A School Corporation that operates a sewage treatment facility [ ]
5. A Regional Water or Sewage District [ ]

*Only pay $50 for new or expansion of the treatment facility.

B. All other entities will pay the following revised fees per project type:

Type			Processing Fee	
1.	New Wastewater Treatment Plant (except Industrial)			
	(A)	Up to 500,000 gallons per day	$1,250	[ ]
	(B)	Greater than 500,000 gallons per day	$2,500	[ ]
2.	New Industrial Wastewater Treatment Plant (including pretreatment)			
	(A)	Up to 500,000 gallons per day for:		
		(1) Biological or Chemical Treatment	$1,250	[ ]
		(2) Physical Treatment	$250	[ ]
	(B)	Greater than 500,000 gallons per day for:		
		(1) Biological or Chemical Treatment	$1,250	[ ]
		(2) Physical Treatment	$250	[ ]
3.	Wastewater Treatment Plant Expansion:			
	(A)	Up to fifty percent (50%) design capacity:		
		(1) Greater than 500,000 gallons/day	$2,500	[ ]
		(2) Up to 500,000 gallons/day	$625	[ ]
	(B)	Greater than fifty percent (50%) design capacity		
		(1) Greater than 500,000 gallons/day	$2,500	[ ]
		(2) Up to 500,000 gallons/day	$1,250	[ ]

Fees shall be remitted with each application made in accordance with the above schedule.

Checks shall be made payable to the Indiana Department of Environmental Management. Fees shall not be refundable once staff review and processing of the Permit Application has commenced.

Indiana Department of Environmental Management
Application for Water Pollution Control Facility
Construction Permit Required by 327 IAC Article 3

1. Applicant (Name and Address)
_____
_____
_____
Phone # _____

2. Applicant's Engineer
Name _____
Company Name _____
Address _____
_____
_____
Phone # _____

3. Name of Proposed Facility _____
_____
Location of Proposed Facility _____
_____
_____
City _____
County _____

[ ]

[ ]

4. ATTACHMENT CHECKLIST:
Sanitary Sewer Projects
The following Documents are attached:
A. Sanitary Sewer Design Summary [ ]
B. Wastewater Allocation Checklist
(Acceptance/Capacity Letter from
Municipality or Sanitary District) [ ]
C. Plans and Specifications [ ]
D. Non-refundable Application fee
(do not send cash)

*E. List of Potentially Affected persons
or parties

5. Permit Application for Construction, Expansion, or Modification of
(check where applicable)

A. Municipal Collection Facility [ ]

B. Semipublic Collection Facility [ ]

C. Municipal Treatment Facility [ ]

D. Semipublic Treatment Facility [ ]

E. Industrial or Commercial Treatment Facility [ ]

F. Coal Mine Sedimentation Basin [ ]

G. Other Specify _____
_____ [ ]

*New Facility [ ]

*Expansion or modification of Existing Facility [ ]

*Fully identify all persons, by name and address, who may be potentially affected by the issuance of this permit, such as adjoining landowners, persons with a propriety interest, and/or persons who have complained or submitted comments about your facility. Failure to identify a potentially affected person may result in any issued permit being challenged and rendered null and void.

6. Signature
Application is hereby made for a Permit to authorize the activities described herein. I certify that I am familiar with the information contained in this application, and to the best of my knowledge and belief such information is true, complete, and accurate.

_____
Printed Name of Person Signing
_____
Title
_____
Signature of Applicant
_____
Date Application Signed

Please refer to IC 13-7-13-3 for penalties of submission of false information

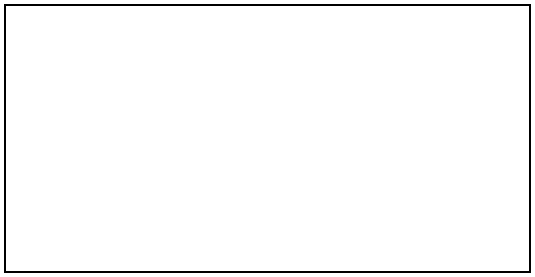
INSTRUCTIONS FOR COMPLETION OF CONSTRUCTION PERMIT APPLICATION

1.	Applicant	Name and address of person, company, firm Municipality, authority, etc., which proposes the construction, installation, or modification of any water pollution treatment/control facility.
2.	Applicant's Engineer	Name, company name, address, and phone number of the Engineer who is designated to act for the applicant and who is familiar with the project and can furnish additional information as required.
3.	Name of Proposed Facility of Project	State its name, location (address if possible), county, and nearest city or town.
4.	Check Block or Blocks	Indicate the category which best describes or classifies the proposed facility. Also indicate whether it is a new facility or an expansion/ modification of an existing facility.
5.	Check the Squares indicating Name of Documents Attached to Application	Copies of the Design Summary forms for Sanitary Sewers. Municipal Treatment, or Industrial Treatment are available from the Facility Construction Section
	All Documents are Required Except Where Inapplicable	A Wasteload allocation checklist and/or an acceptance/capacity letter should be requested from the municipality or sanitary district if required. See Checklist - Part III, Plans and specifications shall be prepared, certified and sealed by an individual qualified under applicable laws of the State of Indiana. The application fee must accompany the application. A list of all potentially affected persons must be submitted with the application if none are known, submit adjoining property owners.
6.	Signature	The person signing the form must be authorized to do so by applicant. An application submitted by a municipality or other public agency must be signed by a ranking elected official, or other duly authorized person. An application submitted by a corporation must be signed by a principal executive officer of at least vice president level or his duly authorized representative, if such a representative is responsible for the overall operation at the facility from which the form will originate. In the case of a partnership or a sole proprietorship, the application must be signed by a general partner or the proprietor, respectively.

Indiana Department of Environmental Management
Office of Water Management
Wastewater Treatment Plant Design Summary

I. General

1. Applicant: *
2. Project Name:*
3. Location:*
4. Engineer (Consultant):*
5. NPDES Permit Number:*
   A. Date of Final Permit Issuance:*
   B. Expiration Date:*
6. Remarks:*
   A. Description of Present Situation:*
   B. Description of Proposed Facilities:*
   C. Inspection During Construction to be Provided by:*
7. Estimated Project Cost:*
   A. Total Cost:*
   B. Source of Funding (Revenue Bond, State Grant, Etc.):*
8. Certification or Seal of Engineer:*



II. DESIGN DATA

1. Current Population:*
2. Design Year and Population:*
3. Design Population Equivalent (P.E.):*
4. Design Flow:*
   A. Domestic:*
   B. Industrial/Commercial:*
   C. Infiltration/Inflow:*
5. Average Design Peak Flow:*
6. Maximum Plant Flow Capacity:*
7. Design Waste Strength
   A. BOD:*
   B. SS:*

C. NH_3-N:*
D. P:*
E. Other:*

8. NPDES Permit Limitation on Effluent Quality:
   A. BOD:*
   B. SS:*
   C. NH_3-N:*
   D. P:*
   E. Chlorine Residual:*
   F. pH:*
   G. D.O.:*
   H. Other:*
9. Receiving Stream:*
   A. Name:*
   B. Tributary to:*
   C. Stream Uses:*
   D. 7 - day, 1 - in - 10 year low flow:*

III. TREATMENT UNITS

Plant Site Lift Station

1. Location:*
2. Type of pump:*
3. Number of pumps:*
4. Constant or variable speed:*
5. Capacity of pumps:*
6. RPH and TDH:*
7. Volume of the wet well:*
8. Detention time in the wet well:*
9. A gate valve and a check valve in the discharge line:*
10. A gate valve on suction line:*
11. Ventilation:*
12. Standby power:*
13. Alarm:*
14. Breakwater tank:*
15. Bypass or overflow:*

Flow Equalization

1. Number and size of units:*
2. Method of flow diversion to unit:*
3. Air and mixing provided:*
4. Method and control of flow return:*
5. Description of unit operation:*
6. Lagoon sealing:*
7. Method of sludge removal:*

Flow Meters

1. Type:*
2. Location:*

3. Indicating, recording and totalizing:*

Grit Chamber

1. Type of grit chamber:*
2. Number of units:*
3. Size of unit:*
4. Method of velocity (aeration) control:*
5. Velocity (aeration) in the chamber:*
6. Drain provided:*
7. Flow restrictions:*
8. Facilities to isolate:*

Comminutors

1. Type:*
2. Location:*
3. Maximum capacity:*
4. By-pass (overflow) bar screen:*

Screens

1. Type:*
2. Number and capacity:*
3. Bar spacing and slope:*
4. Method of cleaning: *
5. Disposal of screenings:*

Primary Settling

1. Type of clarifier:*
2. Number and size of units:*
3. Surface settling rate (gpd/sf)
   a. at the design flow:*
   b. at the influent pumping rate:*
   c. at the equalized flow rate:*
4. Detention time (hrs):*
5. Type of sludge removal mechanism:*
6. Weir overflow rate:*
7. Disposition of scum:*
8. Location of overflow weir:*
9. Facilities to isolate:*

Activated Sludge

1. Type of activated sludge process:*
2. Number and size of units:*
3. Detention time (hrs):*
4. Organic loading (lb BOD/1000 cf):*
5. Type of aeration equipment:*
6. Type and size of blowers:*
7. Air required (itemize, cfm):*
8. Provisions for speed adjustment:*
9. Air provided:*
10. Ventilation in the blower room:*
11. Number and capacity of return sludge pump:*

12. Method of return sludge rate control:*
13. Return sludge rate as % of design flow:*
14. Provisions for return rate metering:*
15. Location of return sludge discharge:*
16. Facilities to isolate units:*
17. Facilities for flow split control:*

Oxidation Ditch

1. Number and size of units:*
2. Detention time (hrs):*
3. Organic loading (lb BOD/1000 cf):*
4. Type and efficiency of aeration equipment (lb 0/HP-hr):*
5. Oxygen required:*
6. Oxygen provided:*
7. Flow velocity in ditch:*
8. Number and capacity of return sludge pump:*
9. Method of return sludge rate control:*
10. Return sludge rate as % of design flow:*
11. Provisions for return sludge metering:*
12. Location of return sludge discharge:*
13. Facilities to isolate units:*
14. Facilities for flow split control:*

Trickling Filters

1. Number and size of units:*
2. Type of media:*
3. Hydraulic loading (gpm/cf):*
4. Organic loading (lb BOD/1000 cf)*
5. Recirculation:*
6. Ventilation:*

Rotating Biological Contractor

1. Size and number of units:*
2. Type of media:*
3. Detention time (min):*
4. Organic loading (lb BOD/1000 sf):*
5. Hydraulic loading (gpd/sf):*
6. Method of shaft drive:*
7. Supplemental air:*
8. Facilities to isolate:*
9. Facilities for flow split control:*

Lagoons

1. Types of lagoons:*
2. Number and size of lagoons:*
3. Organic loading:*
4. Type of aeration equipment (if applicable):*
5. Type and size of blowers (if applicable):*
6. Air required (if applicable):*
7. Air provided (if applicable):*

8. Controlled discharge facilities:*
9. Maximum water level:*
10. Freeboard:*
11. Soil boring data and permeability data:*
12. Slope of embankment and top width:*
13. Fence:*
14. Detention time:*
15. Stream gage:*
16. Lagoon seal:*
17. Facilities for multi-level lagoon discharge:*
18. Scum control:*

Secondary Clarifiers

1. Type of clarifiers:*
2. Number and size of units:*
3. Surface settling rate (gpd/sf):*
    a. at the design flow:*
    b. at the influent pumping rate:*
    c. at the equalized flow rate:*
4. Detention time (hrs):*
5. Type of sludge removal mechanism:*
6. Weir overflow rate:*
7. Disposal of scum:*
8. Facilities for unit isolation:*
9. Facilities for flow split control:*

Rapid Sand Filtration

1. Number and size of filters:*
2. Filtration rate:*
    a. at peak flow rate:*
    b. at average flow rate:*
3. Type, depth, and gram size of filter media:*
4. Backwash rate:*
5. Air scour:*
6. Capability to chlorinate ahead of the filter:*
7. Backwash pumps (number and capacity):*
8. Method of rate control:*
9. source of capacity of backwash water:*
10. Holding capacity or dirty water tank:*
11. Facilities for unit isolation:*

Micro-strainers

1. Number and size of strainers
2. Screen material:*
3. Filtration rate:*
4. Backwash rate:*
5. Number and capacity of backwash pumps:*
6. Facilities for unit isolation:*
7. Slime control provisions:*

Two-day Lagoon

1. Number and size of lagoon cells:*
2. Detention time (days):*
3. Type of chemical:*
4. Location of chemical injection:*
5. Number and size of chemical feed pumps:*
6. Rate adjustment capabilities:*
7. Capacity of chemical storage tank:*
8. Capacity of spill storage space:*
9. Expected daily use of chemical (dosage and solution):*
10. Lagoon seal:*
11. Parallel or series operation:*
12. Sludge removal facilities:*
13. Method of draining:*
14. Multi-level discharge:*
15. Scum control:*

Post-aeration

1. Type of aeration:*
2. Number of units:*
3. Size of units:*
4. Aeration provided:*
5. Expected effluent DO:*

Nitrification System

1. Type of nitrification system:*
2. Ammonia loading:*
3. Additional oxygen demand:*
4. Air supply system:*
5. Hydraulic detention time:*
6. Mean cell residence time (days):*

Phosphorus Removal Facilities

1. Type of chemical to be used:*
2. Location of chemical injection:*
3. Number and size of chemical feed pumps:*
4. Size of chemical storage tank:*
5. Capacity of spill storage space:*
6. Chemical dosage:*
7. Daily chemical consumption expected:*
8. Rapid mix tank:*
9. Slow mixing equipment:*
10. Other facilities - describe:*

Disinfection

1. Type of disinfectant used:*
2. Size of contact tank:*
3. Contact time:*
4. Type of disinfectant feeders:*
5. Capacity of feeders:*

6. Disinfectant dosage:*
7. Scum control baffle:*
8. Source of the disinfectant feed water:*
9. Breakwater tank for the feed water:*
10. Bypass:*
11. Drain for tank:*
12. Ventilation in chlorine room:*
13. Safety equipment:*

De-Chlorination

1. Chemical used:*
2. Type of feeders:*
3. Capacity of feeders:*
4. Dosage:*
5. Type of diffuser:*
6. Diffuser location:*
7. Equipment location:*
8. Ventilation provided:*
9. Safety equipment:*

UV Disinfection

1. Type:*
2. Location:*
3. Size of channel:*
4. Contact time:*
5. Dosage:*
6. Bypass:*
7. Safety equipment:*
8. Cleaning equipment:*

Sludge Thickening

1. Number and size of thickeners:*
2. Type of sludge thickeners:*
3. Hydraulic loading:*
4. Solids loading:*
5. Provisions to chlorinate:*

Anaerobic Digesters

1. Number and size of units:*
2. Total volume:*
3. Organic loading:*
4. Hydraulic detention time:*
5. Volume per capita:*
6. Type of mixing:*
7. Heating: internal or external:*

Aerobic Digesters

1. Number and size of units:*
2. Detention time:*
3. Organic loading:*
4. Air supply:*

5. Decanting method:*

Wet-Oxidation

1. Number of units:*
2. Type of heat treatment:*
3. Temperature and pressure to be used:*
4. Capacity of the unit:*
5. Daily sludge production for heat treatment:*

Sludge Drying Beds

1. Number and size of drying beds:*
2. Filter area pr capita:*
3. Under-drain system:*
4. Discharge location of filtrate:*
5. Accessibility of dry sludge removal equipment:*

Mechanical Dewatering

1. Type of dewatering units:*
2. Number and size of dewatering units:*
3. Capacity of dewatering units:*
4. Daily solids production for dewatering:*
5. Type of chemicals to be used:*

Sludge Disposal

1. Ultimate disposal method of sludge:*
2. Expected solids content of sludge (by the principal method of disposal):*
3. Location of disposal site:*
4. Ownership of the disposal site:*
5. Availability of sludge transport equipment:*

IV. SEWER COLLECTION SYSTEM

Lift Stations

1. Location:*
2. Type of pump:*
3. Number of pumps:*
4. Constant or variable speed:*
5. Capacity of pumps:*
6. RPM and TDH:*
7. Volume of the wet well:*
8. Detention time in the wet well:*
9. A gate valve and check valve in the discharge line:*
10. A gate valve on suction line:*
11. Ventilation:*
12. Standby power:*
13. Alarm:*
14. Breakwater tank:*
15. Bypass or overflow:*
16. Type of force main:*
17. Diameter and length of force main:*

Sewer

1. Type of sewer material:*

2. Diameter and length of sewer (indicate length for each size):*
3. Stream, highway, and railroad crossing:*
4. Separation of combined sewer or new sewer:*
5. Number of manholes:*
6. Water main protection:*

Individual Grinder Pumps

1. Location:*
2. Number of pumps:*
3. Capacity of pumps:*
4. RPM and TDH:*
5. Volume of the wet well:*
6. A gate valve and a check valve in the discharge line:*
7. Ventilation:*
8. Alarm:*

MISCELLANEOUS

A. Laboratory equipment:*
B. Safety equipment:*
C. Plant site fence:*
D. Handrail for the tanks:*
E. Units, unit operation, and plant bypasses:*
F. Flood elevation (10, 25, or 100 year flood):*
G. Consistency with EPA Reliability Technical Bulletin:*
H. Provisions to maintain the same degree of treatment during construction:*
I. Standby power:*
J. Site inspection:*
K. Statement in the specifications as to the protection against any adverse environmental effect (e.g., dust, noise, soil erosion)during construction:*
L. Hoists for removing heavy equipment:*
M. Adequate sampling facilities:*
N. Hydraulic Gradient:*
O. Septage receiving facilities
   1. Screening:*
   2. Location of discharge:*

IDENTIFICATION OF POTENTIALLY AFFECTED PERSONS

Please list here any and all persons whom you have reason to believe have a substantial or proprietary interest in this matter, or could otherwise be considered to be potentially affected under the law. Failure to notify a person who is later determined to be potentially affected could result in voiding our decision on procedural grounds. To ensure conformance with Administrative Adjudication Act (AAA) and to avoid reversal of a decision, please list all such parties. The letter on the opposite side of this form will further explain the requirements under the AAA. Attach additional names and addresses on a separate sheet of paper, as needed. Please indicate below the type of Agency action you are requesting.

NAME	NAME
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP
NAME	NAME
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP
NAME	NAME
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP
NAME	NAME
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP
NAME	NAME
STREET	STREET
CITY, STATE, ZIP	CITY, STATE, ZIP

Please complete this form by signing the following statement:

I certify that to the best of my knowledge I have listed all potentially affected parties, as defined by IC 4-21.5.

Facility Name	Signature
Address	Printed Name
	Date

Type of Action: (check one)

☐ NPDES Permit 327 IAC 5
☐ Land Application Permit 327 IAC 6
☐ Pretreatment Permit 327 IAC 5
☐ Confined Feeding Approval 327 IC 13-18-10

Return to:
Indiana Department of Environmental Management
Office of Water Management
100 North Senate Avenue

☐ Sewer Ban Waiver Request 327 IAC 4
☐ Operator Certification 327 IAC 4
☐ Construction Permit 327 IAC 3

P.O. Box 6015
Indianapolis, IN 46206-6015

To Applicant

Subject: Identification of Potentially Affected Persons

The Administrative Adjudication Act IC 4-21-5 requires that the Department of Environmental Management (IDEM) give notice of its decision on your application to the following persons:

(a) each person to whom the decision is specifically directed:

(b) each person to whom a law requires notice be given:

(c) each competitor who has applied to the IDEM for a mutually exclusive license, if issuance is the subject to the decision and the competitor's application has not been denied in an order for which all rights to judicial review have been waived or exhausted.

(d) each person who has provided the IDEM with written request for notification of the decision.

(e) each person who has a substantial and direct proprietary interest in the issuance of the (permit) (variance):

(f) each person whose absence as a party in the proceeding concerning the (permit) (variance) decision would deny another party complete relief in the proceeding or who claims an interest related to the issuance of the (permit) (variance) and is so situated that the disposition of the matter, in the person's absence may:

(1) as a practical matter impair or impede the person's ability to protect the interest, or

(2) leave any other person who is a party to a proceeding concerning the permit subject to a substantial risk of incurring multiple or otherwise inconsistent obligations by reason of the persons claimed interest.

IC 4-21.5-3-5(f) provides that we may request your assistance in identifying these people. Our failure to properly identify and notify these people of the decision could have the result of voiding any decision which is made.

DRINKING WATER TREATMENT PLANTS

According to **327 IAC 8-3-2**, a valid construction permit issued by the IDEM Drinking Water Branch is required to construct, install, or modify any facility, equipment, or device for any public water supply system. A "**Public Water System**" is defined as a public water supply for the provision to the public of piped water for human consumption, if such a system has at least fifteen (15) service connections or regularly serves an average of at least twenty-five (25) individuals daily at least sixty (60) days out of the year.

Exemptions

Construction permits are **not** required for the following:

1. water main extensions of less than two thousand five hundred(2,500) feet in length;
2. water main extensions which constitute an increase of less than five percent(5%) of the number of existing customers;
3. **noncommunity water systems** and **nontransient noncommunity water systems** with water supply **service populations under five hundred(500) persons**; and
4. replacement of equipment of similar design and capacity, none of which will adversely change the plant operation, its hydraulic design or waste products, or the distribution system design, operation, or capacity.

A "**Noncommunity Water System**" is defined as a public water system which has at least fifteen(15) service connections used by nonresidents, or which regularly serves twenty-five(25) or more nonresident individuals daily for at least sixty(60) days per year.

A "**Nontransient Noncommunity Water System**" is defined as a public water system that regularly serves the same twenty-five(25) or more persons at least six(6) months per year.

Water supply systems at INDOT rest areas, subdistricts, and unit sites are typically classified as either nontransient noncommunity, or transient noncommunity. These types of water supply systems fall under the exemption listed above, and are not required to obtain a construction permit prior to installation. **However, written approval from the IDEM Drinking Water Branch is still required before any construction can begin on these two types of systems.** Unit sites with less than 25 employees are not required to obtain a construction permit or written approval for their drinking water systems, because they do not meet the minimum requirements for a "Public Water System".

A completed Application for *Construction Permit for Public Water Systems* {attached}, and a copy of the plans and specifications must be submitted to IDEM before written approval will be given. All application materials must be prepared by or under a registered professional engineer and must bear his seal and certification that the proposed water supply system will produce drinking water of satisfactory quality and quantity.

The public water supply system must be constructed, modified, installed, and operated in such a manner that it will not violate any of the sanitary or health regulations or requirements existing at the time of the application for the permit. The facility must conform to the design criteria in the "Recommended Standards for Water Works" established by the Great Lakes-Upper Mississippi River Board of State Public Health and Environmental Managers, the American Water Works Association (AWWA) standards, or be based on such criteria that the applicant can show that the system will produce water of sufficient quantity and quality.

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

Instructions For Completing The
Application For Construction Permit
For Public Water System - 327 IAC 8-3-3 (A)

TYPE OR PRINT ALL ENTRIES
The following numbers refer to the enclosed application.

1. Enter the name of the Public Water System as they are chartered by the State of Indiana.
2. Enter the Public Water System Identification Number (PWSID) as chartered by the State of Indiana.
3. Enter the address and/or post office box number of the Public Water System.
4. Enter the telephone number of the Public Water System, including the area code.
5. Enter the name, address and title of the person who is to receive permit.
6. Enter the county(s) where construction will take place.
7. Indicate the location of the project, which includes the city, county and reference to adjacent streets or roads.

   Example: "Bowling Green (city), Madison Street, one block east of Eel River, north side of S.R. 46."

8. Enter a brief description of the project and its purpose.

   Example: "Main Extension, 6-- and 8-- inch, C--900 PVC pipe, to serve Orchard Park Subdivision."

9. Indicate who is funding project.
10. The engineer responsible for the design of the project will put his/her signature, the date, and his/her seal *[not just his/her Professional Engineer (P.E.) number]* in the appropriate spaces. The engineer shall complete Attachment A, B, C, D, and E if appropriate.

    Note: The Engineer must be registered in the State of Indiana

11. Enter the name of the engineering firm responsible for the design of the project.

12. Enter the telephone number of the firm listed in number 11.
13. Enter the address of the firm mentioned in number 12, including the street name and number and/or Post Office box number, city, state, and ZIP code.
14. Check the Indiana Administrative Code (IAC) Rule 327 [IAC 8-3-7(a)] to see if a processing fee is necessary. If so, check the appropriate box(es) and enclose a check for the appropriate amount, made payable to: Indiana Department of Environmental Management
15. Check box if project contains water main construction: Complete Attachment A.
16. Check box if project contains well construction: Complete Attachment B.
17. Check box if project contains pump construction: Complete Attachment C.
18. Check box if project contains storage facility construction: Complete Attachment D.
19. Check box if project contains chemical addition construction: Complete Attachment E.
20. Check box if project contains treatment facility construction: Complete all applicable Attachments.
21. Enter the names and addresses of persons believed to have a substantial or proprietary interest in this project or considered to be potentially affected under the law. ***Must provide mailing labels for each potentially affected person.*** Also, a Public Water System's official involved in this project should fill out the bottom section (No. 21) of this application.

APPLICATION FOR CONSTRUCTION PERMIT FOR PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a)

State Form 35058 (R4/ 12-94)
Approved by State board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

FOR AGENCY USE
Permit number WS -
Approval number M -
Date received by IDEM (*mo., day, yr.*)

1. Name of public water system	2. PWSID number
3. Address of public water system	4. Telephone number of public water system ( )
5. Name, address and title of person who is to receive permit	6. County of construction
7. Location of project (*include city, county and reference to adjacent streets or roads*)	
8. Brief description of project	
9. Source of funding for project	

10. Certification by Design Engineer I hereby certify that I am familiar with the information contained in this application and that to the best of my knowledge and belief, such information is true, complete and accurate.		P.E. seal
Signature of engineer	Date signed (*mo., day, yr.)*	
11. Name of engineering firm	12. Telephone number ( )	
13. Address of engineering firm		

NOTE: THIS APPLICATION WILL BE RETURNED IF NOT ACCOMPANIED WITH THE REQUIRED FEE UNLESS THE APPLICANT IS EXEMPTED UNDER 327 IAC 8-3-7(a)

14. Construction Permit Processing Fee Schedule

A. New public water system treatment plant			C. Other water treatment facilities		
Groundwater:	$ 875	☐	Wells	$ 500	☐
Up to 500,000 gallons per day	$ 1,750	☐	Pump or pump station	$ 100	☐
Greater than 500,000 gallons per day			Chemical addition	$ 250	☐
Surface water:	$ 1,250	☐	Storage tank	$ 200	☐
Up to 500,000 gallons per day	$ 2,500	☐	Miscellaneous process modification	$ 50 per process	☐
Greater than 500,000 gallons per day					
B. Public water system treatment plant expansion			D. All water distribution system		
Up to fifty percent (50%) design capacity	$ 625	☐	2,501 - 5,000 linear feet	$ 150	☐
Up to 500,000 gallons per day	$ 1,250	☐	5,001 - 10,000 linear feet	$ 250	☐
Greater than 500,000 gallons per day			Greater than 10,000 linear feet	$ 500	☐
Greater than fifty percent (50%) design capacity	$ 1,250	☐			
Up to 500,000 gallons per day	$ 2,500	☐			
Greater than 500,000 gallons per day					

15. For water main construction: Complete Attachment A	☐
16. For well construction: Complete Attachment B	☐
17. For any pumping facility construction: Complete Attachment C	☐
18. For storage facility construction: Complete Attachment D	☐
19. For chemical addition: Complete Attachment E	☐
20. For treatment facility construction: Complete all applicable Attachments	☐

21. Identification of potentially affected persons	
The administrative Adjudication Act requires that the Department of Environmental Management (Indiana Department of Environmental Management) give notice of its decision on your application to the following persons: a. Each person to whom the decision is specifically directed; b. Each person to whom a law requires notice to be given; c. Each competitor who has applied to the Indiana Department of Environmental Management for a mutually exclusive license, if issuance is the subject of the decision d. Each person who has provided the Indiana Department of Environmental Management with a written request for notification of the decision; e. Each person who has substantial and direct proprietary interest in the issuance of the permit/variance;	f. Each person whose absence as a part in the proceedings concerning the permit/variance decision would deny another party complete relief in the proceeding or who claims an interest related to the issuance of the permit/variance and is so situated that the disposition of the matter in the person's absence may; 1. As a practical matter impair or impede the persons ability to protect that interest, or 2. Leave any other person who is a party to a proceeding concerning the permit subject to a substantial risk of incurring multiple or otherwise inconsistent obligations by reason of the person's claimed interest. IC 4-21.5-3-5(f) provides that we may request that you assist us in identifying these people. Our failure to properly identify and notify these people of the decision could result in voiding the decision which is made.
List below persons whom you have reason to believe have a substantial or proprietary interest in this matter, or could otherwise be considered to be potentially affected under the law. Failure to notify a person who is later determined to be potentially affected could result in voiding our decision on procedural grounds. To ensure conformance with the Administrative Adjudication Act and to avoid reversal of a decision**, you must list all such parties and must provide mailing labels if there are more than five (5) potentially affected parties**. (*Use additional sheets if necessary)*	
1. Name of affected party	5. Name of affected party
Address (*street and number or rural route number*)	Address (*street and number or rural route number*)
City, state and ZIP code	City, state and ZIP code
2. Name of affected party	6. Name of affected party
Address (*street and number or rural route number*)	Address (*street and number or rural route number*)
City, state and ZIP code	City, state and ZIP code
3. Name of affected party	7. Name of affected party
Address (*street and number or rural route number*)	Address (*street and number or rural route number*)
City, state and ZIP code	City, state and ZIP code
4. Name of affected party	8. Name of affected party
Address (*street and number or rural route number*)	Address (*street and number or rural route number*)
City, state and ZIP code	City, state and ZIP code
I certify, that to the best of my knowledge, I have listed all potentially affected parties as defined by IC 4-21.5, known to me. If "NONE" is indicated it signifies that no such parties exist.	
Official signature of Public Water System	Date signed (*month, day, year*)
Printed name and title of official	
THE COMPLETED APPLICATION, ALONG WITH ALL REQUIRED FEES AND ATTACHMENTS SHOULD BE MAILED TO: Drinking Water Branch Indiana Department of Environmental Management 100 N. Senate Ave. P.O. Box 6015 Indianapolis, Indiana 46206-6015 Make checks payable to: Indiana Department of Environmental Management	

APPLICATION FOR CONSTRUCTION PERMIT FOR
Attachment A
PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a) Water Main Construction

State Form 35058 (R4/ 12-94)
Approved by State Board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

1. Water Main Construction

A. This construction is (*check all that apply*)
☐ New ☐ Replacement ☐ Relocation

B. Pipe material	Sizes	Class	Pressure rating(s)

C. Length of proposed water main project	D. Type of joint	E. Depth of cover per frost penetration map inches	F. Is the main providing fire protection ☐ Yes ☐ No

G. How will the main be pressure/leak tested?

H. How will the main be disinfected?

I. How will the fire hydrants and water mains at each tee, bend and dead end be blocked or anchored?

2. Design Specifics and Plans		
A. Minimum horizontal clearance between water mains and sewers	B. Minimum vertical clearance between water mains and sewers	
C. Are there any stream crossings ☐ Yes ☐ No	D. Spacing between valves	E. Spacing between hydrants
F. Is there a history of external corrosion problems with buried pipe in the project area? (*If Yes, provide copy of any corrosion study and explain corrosion protection measures)* ☐ Yes ☐ No		

3. System Design Data		
A. Number of existing service connections served by the utility	B. Number of service connections added by the proposed water main	C. Flow of existing main at or near the point of connection under maximum demand conditions
D. Existing pressure at or near point of connection under maximum demand conditions	E. Anticipated maximum demand of proposed water main (*attach any supporting documents*)	
F. Normal expected operating pressure on the proposed water main (*attach any supporting documents*)	G. Minimum expected operating pressure on the proposed water main (*attach any supporting documents*)	
H. Calculated pressure at or near point of connection under anticipated maximum demand conditions (*attach any supporting documents)*	I. Capacity of water treatment facility	
J. Average daily pumpage from treatment facility during the past year	K. Maximum daily pumpage from treatment facility during the past year	

4. Plans and Specifications	
A. Is one complete set of legible plans submitted? ☐ Yes ☐ No	B. Is a set of specifications submitted? ☐ Yes ☐ No
C. Is each and every page of the plans, as well as the cover of the specifications signed and sealed by a professional engineer who is registered in the State of Indiana? ☐ Yes ☐ No	D. Is a plan showing the sizes and locations of all mains in the distribution system available? (*If Yes, submit a copy*) ☐ Yes ☐ No

5. Certification to Furnish Water (*this section must be completed*)

The _____ has agreed to furnish
City, Town, Village, Water Company or Water Authority

water to the area in which water main extensions are proposed by _____
Name or developer

according to plans titled "_____" and prepared by

_____. The undersigned acknowledges the public water
Name of Engineering firm

supplier's responsibility for examining the plans and specifications to determine that the proposed extensions meet local rules or laws, regulations and ordinances.

Date signed (*month, day, year*)	By: (*signature of public water system official*)
Name of public water system	Title

APPLICATION FOR CONSTRUCTION PERMIT FOR
Attachment B
PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a) Well Construction

State Form 35058 (R4/ 12-94)
Approved by State Board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

NOTE: Before review of your well construction permit application can begin, the following must be provided:

A. A well-site approval
B. Copies of recorded deeds or easements showing control of the land immediately surrounding the well head
C. Data showing highest known flood elevations in the area

1. Well Design Specifications

A. How many existing wells are in the well field?	B. What is the rated capacity of the existing wells?	C. How many new wells are intended?

D. What type of well will it be? *(Gravel, pack, radial, water collector, etc.)*	E. What is the estimated depth of the well?

F. Length of casing	Diameter of casing	Casing material	Elevation of the tip of the casing

G. If the well is in a pumphouse, how far will the well casing extend above the pumphouse floor?	H. If applicable, how far does the casing extend into the pump base?

I. How far above final ground surface will the well casing extend?

J. Length of screen	Diameter of screen	Size of screen	Designed entrance velocity of screen

K. If applicable, what type of grouting material will be used?	L. To what depth will the well be grouted?	M. What type of well pump is intended? (*Line shaft, submersible, etc.) (attach pump curves)*

N. What is the pump's rated capacity?	O. What type of pump lubrication will be used?

P. What type of provision is made for periodic water level measurements in the well?

_____
_____
_____
_____

Q. Is the discharge piping equipped with the following:

☐ Yes ☐ No Check valve ☐ Yes ☐ No Pressure gauge ☐ Yes ☐ No Smooth-nosed sampling tap
☐ Yes ☐ No Shut-off valve ☐ Yes ☐ No Means of measuring flow ☐ Yes ☐ No Air release/vacuum relief valve

R. Do the specifications describe the test pumping procedures? (*If not, please explain*) ☐ Yes ☐ No

_____
_____
_____
_____

S. How will power be supplied to the pumps in the event of an interruption to the primary power source?

_____
_____
_____
_____

APPLICATION FOR CONSTRUCTION PERMIT FOR
Attachment C
PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a) Pumping Station
State Form 35058 (R4/ 12-94)
Approved by State Board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

A. What is the highest known flood elevation in the area?	B. What is the pumphouse floor elevation?	
C. What is the elevation of the finished grade?	D. How many pumps are provided? (*Attach pump curves*)	E. What is the expected peak demand of the system?

F. How will power be supplied to the pumps in the event of an interruption to the primary power source?

G. What kind of monitoring is in place in case pumps or their controls malfunction?

H. Does each pump have a pressure gauge on its discharge line and a compound gauge on its suction line? ☐ Yes ☐ No	I. Is there a low suction cut-off control? ☐ Yes ☐ No	If Yes, what is its setting?

J. How is the total discharge of the pump(s) measured?

K. Does the pump have a check valve? ☐ Yes ☐ No	If Yes, where is the check valve located?

APPLICATION FOR CONSTRUCTION PERMIT FOR
Attachment D
PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a)
Storage Facilities

State Form 35058 (R4/ 12-94)
Approved by State Board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

A. What is the highest known flood elevation in the area?	B. What type of storage facility is this? (*Standpipe, elevated, etc*.)
C. What is the capacity of the storage facility?	D. What is the elevation at the base of the storage facility?
E. How is the storage facility isolated from the distribution system?	
F. What is the filling rate of the storage facility?	G. What size is the overflow pipe? Is the overflow pipe screened? ☐ Yes ☐ No What size screen?
H. What is the maximum variation in the high and low levels of the storage facility?	
I What provisions have been made to monitor water levels in the storage facility?	
J. What provisions have been made to allow for the draining of the storage facility?	
K. Where are the sampling taps located?	
L. How is the storage facility protected from trespassers, vandalism and sabotage?	
M. How is the storage facility being protected from corrosion?	
N. How is the storage facility being protected from freezing?	
O. What provisions have been made to make the interior of the storage facility easily accessible for inspection and maintenance work?	

APPLICATION FOR CONSTRUCTION PERMIT FOR
Attachment E
PUBLIC WATER SYSTEM - 327 IAC 8-3-3(a)
Chemical Addition

State Form 35058 (R4/ 12-94)
Approved by State Board of Accounts 1992
Indiana Department of Environmental Management
Drinking Water Branch

A. What is the common/brand name of the intended chemical? What is the chemical name of the intended chemical?

B. Does the chemical have the approval of any of the following:
☐ Yes ☐ No National Sanitation Foundation (NSF)
☐ Yes ☐ No Underwriters Laboratory (UL)
☐ Yes ☐ No Food and Drug Administration (FDA)

C. What is the purpose of the chemical addition?

D. Technical data supplied on the chemical (*check all that apply*)
☐ Material Safety Data Sheet ☐ Manufacturer's Label ☐ Other Studies / Literature
☐ Toxicology Data ☐ Case Histories of Chemical Use

E. Describe or provide technical information on the type of feed equipment intended

F. Describe or provide technical information on the type of feed controls intended

G. What is maximum and minimum feed range?

H. How have chemical feed rates been determined? (*Attach any supporting documentation*)

I. Is there a means of measuring the quantity of chemical used?
☐ Yes ☐ No

J. Do the plans show the following?
☐ Yes ☐ No Location of all feeders ☐ Yes ☐ No All points of chemical application ☐ Yes ☐ No Piping layout

K. What type of cross connection control is provided?

L. Briefly describe how the chemical will be handled and stored

M. Briefly describe any provisions made for operator and plant safety